OMB Number: 4040-0004 Expiration Date: 03/31/2012

Application for Federal As	sistance SF-424		
* 1. Type of Submission: Preapplication Application Changed/Corrected Application	New Continuation	* If Revision, select appropriate letter(s): * Other (Specify)	=
* 3. Date Received:	4. Applicant Identifier:		
5a. Federal Entity Identifier:		* 5b. Federal Award Identifier:	
State Use Only:			
6. Date Received by State:	7. State Application	Identifier:	
8. APPLICANT INFORMATION:			
* a. Legal Name: State of Maine Depart	artment of Environmental Protection	1	$\overline{}$
* b. Employer/Taxpayer Identification N 01-6000001	lumber (EIN/TIN):	* c. Organizational DUNS:	
d. Address:			
* Street1: 28 Tyson Driv Street2: 17 State House			
* City: Augusta	1, 141		
County: Kennebec * State: Maine			
Province:			
* Country:		USA: UNITED STATES	
* Zip / Postal Code: 04333			_
e. Organizational Unit:		*,	
Department Name:		Division Name:	
Department of Environmental Pro	otection	Division of Environmental Protection	
f. Name and contact information of	person to be contacted on ma	atters involving this application:	
Prefix:	* First Name	E. Jeanne	
Middle Name:			
* Last Name: DiFranco			
Suffix:			
Title: Aquatic Biologist			
Organizational Affiliation: Biological Monitoring Program			
* Telephone Number: 207.699.834	5	Fax Number: 207.822.6303	
* Email: jeanne.l.difranco@maine.g	jov		

Application for Federal Assistance SF-424
9. Type of Applicant 1: Select Applicant Type:
State Government
Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:
* Other (specify):
* 10. Name of Federal Agency:
US Environmental Protection Agency, Region 1
11. Catalog of Federal Domestic Assistance Number:
66.461
CFDA Title:
Wetland Program Development Grants
* 12. Funding Opportunity Number:
EPA-REG1-13-14
* Title:
FY13 and FY14 Region 01 Wetland Program Development Grants
13. Competition Identification Number:
Title:
14. Areas Affected by Project (Cities, Counties, States, etc.):
State of Maine
* 15. Descriptive Title of Applicant's Project:
Biological Indicators and Tiered Aquatic Life Use Criteria for Maine Wetlands
Attach supporting documents as specified in agency instructions.

V. 7

Application for Federal Assistance SF-424
16. Congressional Districts Of:
* a. Applicant ME-001 * b. Program/Project ME-All
Attach an additional list of Program/Project Congressional Districts if needed.
17. Proposed Project:
* a. Start Date: January 2014 * b. End Date: December 2016
18. Estimated Funding (\$):
* a. Federal 398,408
* b. Applicant 132,802
* c. State
* d. Local
* e. Other
* f. Program Income
*g. TOTAL 531,210
* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?
a. This application was made available to the State under the Executive Order 12372 Process for review on June 7, 2013.
b. Program is subject to E.O. 12372 but has not been selected by the State for review.
c. Program is not covered by E.O. 12372.
* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.) Applicant Federal Debt Delinquency Explanation
☐ Yes ☒ No
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) ** I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.
Authorized Representative:
Prefix: * First Name: Patricia
Middle Name: W
* Last Name: Aho
Suffix:
* Title: Commissioner
* Telephone Number: 207.287.7830 Fax Number: 207.287.2814
* Email: patricia.aho@maine.gov
* Signature of Authorized Representative: * Date Signed: * Date Si

pplication for Fe	deral Assistan	ce SF-424		%:		
Applicant Federal De	ebt Delinquency E	Explanation		9k		
e following field show aracters that can be e	uld contain an expl entered is 4,000. Tr	lanation if the Applicant organ y and avoid extra spaces and c	ization is delinquent o arriage returns to maxii	n any Federal Debt. I	Maximum number of space.	
- 1-30v				*		
					•	
		- 				
		5. 5 .5				

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OMB Approval No. 0348-0044

0.00	49	€	49	€9		7. Program Income
531,210.00	132,802.00	398,408.00	\$ 0.00	\$ 0.00		k. TOTALS (sum of 6i and 6j)
79,574.00	22,298.00	57,276.00			les	j. Indirect Charges
451,636.00	110,504.00	341,132.00	0.00	0.00	i. Total Direct Charges (sum of 6a-6h)	i. Total Direct C
0.00	0					h. Other
0.00						g. Construction
0.00		3 S		/a		f. Contractual
2,000.00		2,000.00				e. Supplies
0.00			-			d. Equipment
4,000.00		4,000.00				c. Travel
154,429.00	33,151.00	121,278.00			lts	b. Fringe Benefits
291,207.00	77,353.00	\$ 213,854.00	4	€		a. Personnel
Total (5)		(3) (4)	GRANI PROGRAM, FU			6. Object Class Categories
		3	SECTION B - BUDGET CATEGORIES	SECTIO		
531,210.00	132,802.00	\$ 398,408.00	\$ 0.00	\$ 0.00		5. Totals
0.00						4.
0.00						
0.00						2.
			\$	\$	66.461	1. Reg 1 WPDG
Total (g)	Non-Federal (f)	Federal (e)	Non-Federal (d)	Federal (c)	Number (b)	or Activity (a)
	New or Revised Budget	z	Estimated Unobligated Funds	Estimated Uno	Catalog of Federal Domestic Assistance	Grant Program Function
		/ARY	SECTION A - BUDGET SUMMARY	SECT		

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Prescribed by OMB Circular A-102

	The Carrier and				
	SECTION	SECTION C - NON-FEDERAL RESOURCES	ESOURCES		
(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8. Region 1 - Wetland Program Development Grant	pment Grant	132,802			\$132,802
9.					€9
10.					89
11.					69
12. Total (SUM OF LINES 8-11)		132,802			\$132.802
	SECTION	SECTION D - FORECASTED CASH NEEDS	SH NEEDS		
13. Federal	Total for 1st Year	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter
	\$ 199,204	\$49,801	\$49,801	\$49,801	\$49,801
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$ 199,204	\$49,801	\$49,801	\$49,801	\$49,801
SECTION E - BU	BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED	FEDERAL FUNDS NEI		FOR BALANCE OF THE PROJECT	
(a) Grant Program			FUTURE FU	FUTURE FUNDING PERIODS (years)	
		(b) First	(c) Second	(d) Third	(e) Fourth
16. Region 1 - Wetland Program Development Grant	elopment Grant	\$ 199,204	₩	₩	⇔
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)		\$ 199,204	69	€9	69
	SECTION F	SECTION F - OTHER BUDGET INFORM	ORMATION		
21. Direct Charges: 341,132		22. Indirec	Indirect Charges: 57,276 (16.79%)	(16.79%)	
23. Remarks:					